## Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	9-15-2014	Street:	1477 Bethlehem Rd	
Incident #:	14ispc007928	Apt, Lot, Ro	Apt, Lot, Room #:	
County:	Harrison	City:	New Salisbury	
Type of Laboratory Seizure (check one)		Seizure Locatio	Seizure Location (check all that apply)	
<ul><li>□ Lab Seizure</li><li>☑ Chemical Seizure</li><li>□ Equipment Seizure</li><li>□ Dumpsite Seizure</li></ul>		Residence Outbuilding Vehicle Other:	Business	
Apt., hotel, multi-family dwelling: Shared HVAC: Yes No Unknown				
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)				
<ul> <li>☐ One Pot or Birch Reaction(s):</li> <li>☐ Red Phosphorous/Iodine Reaction(s):</li> <li>☐ Hydrochloric Acid Gas Generator(s):</li> <li>☐ Flammable Solvents: Vehicle</li> <li>☐ Water Reactive Metal (Lithium):</li> <li>☐ Anhydrous Ammonia:</li> </ul>		☐ Corros ☑ Ammo	<ul> <li>☐ Corrosive Acid:</li> <li>☐ Corrosive Base:</li> <li>☐ Ammonium Nitrate/Sulfate: Vehicle</li> <li>☐ Other (item and location): Pseudoephedrine-Vehicle</li> </ul>	
Child under age 18 discovered (check appropriate)				
☐ Yes (number present) ☐ No ☐ Children not present but evidence they reside or visit often		unclea Estimated occurring:	Living conditions of home: clean disarray unclean time manufacturing had been occurring: Additional Information:	
Vehicle, Travel Trailer, RV or Watercraft Information:				
Owner: VIN: Year:	<u>Stacey J. Carmack</u> <u>1FAFP34N07W186018</u> <u>2007</u>	Make: Model: Color:	Ford Focus 4 door Grey	
This report has been faxed* or emailed to the following agencies that serve the location:				
Fire Department: <u>Ramsey VFD</u> Health Department County: <u>Harrison Co</u> Department of Child Services Hotline: <u>dcshotlinereport</u>		Fax: Em	Fax: Mailed Fax: Emailed rts@dcs.in.gov Fax: 317-234-7595 or 317-234-7596	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K Smith Phone 812-246-5424				
*This forms is to be found to the Line Department Health Department and/on Department of Child Complete listed within 24 hours of				

\*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.